



MISSION INCIDENT VNC 14-0075269



ENVIRONMENTAL HEALTH



November 22, 2014
0800-1800

<p align="center">INCIDENT OBJECTIVES</p> <p align="center">ICS-202</p>	<p>1. INCIDENT NAME</p> <p align="center">MISSION</p>	<p>2. DATE PREPARED</p> <p align="center">11/21/14</p>	<p>3. TIME PREPARED</p> <p align="center">1300</p>						
<p>4. OPERATIONAL PERIOD (DATE/TIME)</p> <p>November 22, 2014 0800 – 1800</p>									
<p>5. CONTROL OBJECTIVES FOR THE INCIDENT (INCLUDE ALTERNATIVES)</p> <ul style="list-style-type: none"> • Provide for responder and public safety. • Maintain situational awareness at all times; monitor current and potential hazardous conditions. • Anticipate and address incident and community impacts. • Work to identify the products. • Mission Incident will transition to a site clean-up under Environmental Health and EPA. • Work with partnering agencies to provide a safe plan to reopen road access to businesses and residents. • Support planned community meeting. • Provide supervision for the decontamination of fire apparatus. • Work with partnering agencies to support agricultural interests and concerns. • Keep public, businesses and cooperators informed of current and expected incident actions. • Support investigation with product sampling as needed. 									
<p>6. WEATHER FORECAST FOR OPERATIONAL PERIOD</p> <p>See attached</p>									
<p>7. GENERAL/SAFETY MESSAGE</p> <p>See attached</p>									
<p>8. ATTACHMENTS (CHECK IF ATTACHED)</p> <table border="0"> <tr> <td><input checked="" type="checkbox"/> ORGANIZATION LIST (ICS 203)</td> <td><input checked="" type="checkbox"/> MEDICAL PLAN (ICS 206)</td> </tr> <tr> <td><input checked="" type="checkbox"/> DIVISION ASSIGNMENT LISTS (ICS 204)</td> <td><input checked="" type="checkbox"/> INCIDENT MAP</td> </tr> <tr> <td><input checked="" type="checkbox"/> COMMUNICATIONS PLAN (ICS 205)</td> <td><input checked="" type="checkbox"/> WEATHER FORECAST</td> </tr> </table>				<input checked="" type="checkbox"/> ORGANIZATION LIST (ICS 203)	<input checked="" type="checkbox"/> MEDICAL PLAN (ICS 206)	<input checked="" type="checkbox"/> DIVISION ASSIGNMENT LISTS (ICS 204)	<input checked="" type="checkbox"/> INCIDENT MAP	<input checked="" type="checkbox"/> COMMUNICATIONS PLAN (ICS 205)	<input checked="" type="checkbox"/> WEATHER FORECAST
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<p>9. PREPARED BY</p> <p>Barb Geringer</p>	<p>10. APPROVED BY (INCIDENT COMMANDER)</p> <p align="center">Norm Plott</p>								

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Spot Forecast for Mission Fire

National Weather Service Los Angeles/Oxnard

113 PM PST Fri Nov 21 2014

IF CONDITIONS BECOME UNREPRESENTATIVE,
CONTACT THE NATIONAL WEATHER SERVICE.

SPOT FORECAST FOR MISSION...VTU

NATIONAL WEATHER SERVICE LOS ANGELES/OXNARD CA

113 PM PST FRI NOV 21 2014

FORECAST IS BASED ON INCIDENT TIME OF 1217 PST ON NOVEMBER 21.

IF CONDITIONS BECOME UNREPRESENTATIVE...CONTACT THE NATIONAL WEATHER
SERVICE.

.DISCUSSION...A SECOND FRONTAL SYSTEM WILL CROSS THE AREA TONIGHT
INTO SATURDAY BUT NO RAIN IS EXPECTED FOR THE MISSION LOCATION. A
COLD NORTHERLY FLOW WILL SET UP BEHIND THE FRONT SATURDAY
AFTERNOON AND EVENING...ALTHOUGH WINDS IN THE MISSION AREA WILL
REMAIN LIGHT TO LOCALLY MODERATE THROUGH LATE SATURDAY NIGHT. BY
SUNDAY MORNING STRONGER NORTH TO NORTHEAST WINDS ARE EXPECTED
ACROSS THE AREA. OVER THE HIGHER RIDGES OF COASTAL VENTURA
COUNTY...NORTH TO NORTHEAST WIND GUSTS OF 25 TO 30 MPH ARE
EXPECTED SUNDAY MORNING WITH STRONGER WINDS INLAND. WINDS WILL
CONTINUE TO SHIFT TO THE NORTHEAST SUNDAY AFTERNOON...BEGINNING A
DRYING AND WARMING TREND THAT WILL PERSIST THROUGH MIDWEEK ALONG
WITH CONTINUED OFFSHORE WINDS.

.TONIGHT...

SKY/WEATHER.....PARTLY CLOUDY.

MIN TEMPERATURE.....AROUND 50.

MAX HUMIDITY.....78-82 PERCENT.

WIND (20 FT).....SOUTHWEST 6-12 MPH EARLY IN THE EVENING BECOMING
NORTH 3-6 MPH.

MIXING HEIGHT.....1600 FT AGL DECREASING TO 800 FT AGL.

TRANSPORT WINDS.....NORTHWEST AROUND 5 MPH.

.SATURDAY...

SKY/WEATHER.....MOSTLY SUNNY.

MAX TEMPERATURE.....AROUND 72.

MIN HUMIDITY.....35-39 PERCENT.

WIND (20 FT).....NORTHEAST 5-9 MPH BECOMING WEST 6-10 MPH WITH
LOCAL

GUSTS TO 14 MPH IN THE AFTERNOON.

MIXING HEIGHT.....1000 FT AGL...INCREASING TO 3800 FT AGL IN THE
LATE MORNING AND EARLY AFTERNOON.

TRANSPORT WINDS.....NORTHWEST AROUND 10 MPH.

.SATURDAY NIGHT...

SKY/WEATHER.....PARTLY CLOUDY.

MIN TEMPERATURE.....AROUND 53.

MAX HUMIDITY.....83-88 PERCENT.

WIND (20 FT).....WEST 8-15 MPH EARLY IN THE EVENING BECOMING
NORTH TO NORTHEAST 6-12 MPH WITH LOCAL GUSTS TO

20 MPH

IN THE MORNING.

MIXING HEIGHT.....1200 FT AGL DECREASING TO 500 FT AGL.

TRANSPORT WINDS.....NORTH AROUND 11 MPH.

HEALTH AND SAFETY MESSAGE

SAFETY starts with *YOU*

We are ALL accountable for SAFE behaviors

INCIDENT: MISSION

DATE: November 22, 2014

TIME: 0800-1800

Narrative:

Don't let your guard down and pay strict attention to your overall objectives. Brief all those involved any time there is a deviation from the plan or dangerous situations. Ensure site safety plan is completed and the appropriate PPE is utilized for the task assigned. Stay alert and don't become complacent! Obey hazard control lines. Communicate and coordinate with all agencies involved with the plan. Drink plenty of water during your shift and pace yourself.

SAFETY PRACTICE AND PROCEDURES TO MINIMIZE RISK

- | | |
|--|---|
| <ul style="list-style-type: none">• ENSURE ALL VEHICLES ARE FACING DIRECTION OF EXIT• UTILIZE ALL PROTECTIVE EQUIPMENT• KNOW YOUR ESCAPE ROUTES• ENSURE DECON TEAM IS AWARE OF DECON OBJECTIVES• DRINK LOTS OF WATER | <ul style="list-style-type: none">• ESTABLISH AN AREA OF SAFE REFUGE• ENSURE INJURED OR EXPOSED INDIVIDUALS ARE DECONTAMINATED PRIOR TO DEPARTURE FROM SITE• MAINTAIN OBSERVATIONS OF ALL CONTROL ZONES AND ENSURE NO UNAUTHORIZED MOVEMENT BETWEEN THE ZONES• REPORT <u>ALL</u> ILLNESSES AND INJURIES TO YOUR SUPERVISOR |
|--|---|

Incident Safety Officer: Michael G Valley

1. BRANCH FIRE/HAZ MAT		2. DIVISION/GROUP		<div style="font-size: 1.2em; font-weight: bold;">DIVISION ASSIGNMENT LIST</div> <div style="font-weight: bold;">ICS-204</div>			
3. INCIDENT NAME MISSION			4. OPERATIONAL PERIOD <div style="text-align: right;">DATE: November 22, 2014</div> <div style="text-align: right;">TIME: 0800-1800</div>				
5. OPERATIONS PERSONNEL							
OPERATIONS SECTION CHIEF: DIVISION/GROUP SUPERVISOR :				BRANCH DIRECTOR: STEVE WINTER AIR TACTICAL GROUP SPVR:			
6. RESOURCES ASSIGNED THIS PERIOD							
STRIKE TEAM/TASK FORCE/RESOURCE DESIGNATOR	LEADER	NUMBER PERSONS	TRANS. NEEDED	DROP OFF POINT/TIME	PICK UP POINT/TIME		
HM50	QUIRARTE	3	N	0800	1800		
HM6	DULLAM	4	N	0800	1800		
E57	ROULSTON	3	N	0800	1800		
E126	HORTON	3	N	0800	1800		
HMO	BAKER	1	N	0800	1800		
GMEC	CHRIS MORDA	1	N	0800	1800		
GMEC	JOSE ARROELA	1	N	0800	1800		
7. OPERATIONS <ul style="list-style-type: none"> PROVIDE FOR ENTRY AND RECON IN THE IMPACT AREA. PROVIDE DECON AS NEEDED. 							
8. SPECIAL INSTRUCTIONS CONTINUE TO WORK WITH APPROPRIATE RESOURCES AND COLLABORATING AGENCIES TO PROPERLY IDENTIFY HAZARDOUS MATERIAL. WORK WITH THE AGRICULTURE DEPARTMENT TO IDENTIFY IMPACT TO SURROUNDING AGRICULTURAL INTEREST. DELIVER ARTICLES TO CONTRACTOR FOR WASTE DISPOSAL.							
9. DIVISION/GROUP COMMUNICATIONS SUMMARY							
FUNCTION	FREQUENCY	TONE	CHAN.	FUNCTION	FREQUENCY	TONE	CHAN.
COMMAND	RX 154.325 TX 155.835	79.7	VNC 2				
TACTICAL	RX 153.9500 TX 153.9500	167.9	VNC 3				
VCSSO	RX 151.1300 TX 158.7900	151.4	VNC 49 Z-4, CH. 1	GROUND TO AIR	RX 154.235 TX 154.235	167.9	VNC 11
PREPARED BY Barb Geringer			APPROVED BY (PLANNING SECTION CHIEF) Barb Geringer			DATE 11/21/2014	TIME 1900

2. BRANCH LAW ENFORCEMENT		3. DIVISION/GROUP		DIVISION ASSIGNMENT LIST ICS-204			
4. INCIDENT NAME MISSION				5. OPERATIONAL PERIOD DATE: November 22, 2014 TIME: 0800-1800			
6. OPERATIONS PERSONNEL							
OPERATIONS SECTION CHIEF: DIVISION/GROUP SUPERVISOR :				BRANCH DIRECTOR: DAVE WAREHAM AIR TACTICAL GROUP SPVR:			
6. RESOURCES ASSIGNED THIS PERIOD							
STRIKE TEAM/TASK FORCE/RESOURCE DESIGNATOR	LEADER	NUMBER PERSONS	TRANS. NEEDED	DROP OFF POINT/TIME	PICK UP POINT/TIME		
PATROL	AGUILAR	8	N	0800	1800		
DA INVESTIGATORS	REYNOSO	4	N	0800	1800		

8. OPERATIONS

- CONDUCT PATROL
- ROAD CLOSURES IF NEEDED
- EVACUATION AREA SECURITY
- CONDUCT INVESTIGATION

9. SPECIAL INSTRUCTIONS

10. DIVISION/GROUP COMMUNICATIONS SUMMARY

FUNCTION		FREQUENCY	TONE	CHAN.	FUNCTION		FREQUENCY	TONE	CHAN.
COMMAND		RX 154.325 TX 155.835	79.7	VNC 2	AIR TO AIR				
LAW		RX 151.1300 TX 158.7900	151.4	VNC 49					
					GROUND TO AIR	RX 154.235 TX 154.235		167.9	VNC 11

PREPARED BY Barb Geringer			APPROVED BY (PLANNING SECTION CHIEF) Barb Geringer			DATE 11/21/2014	TIME 1725
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3. BRANCH ENVIRONMENTAL HEALTH		4. DIVISION/GROUP		DIVISION ASSIGNMENT LIST ICS-204					
5. INCIDENT NAME MISSION				6. OPERATIONAL PERIOD DATE: November 22, 2014 TIME: 0800-1800					
7. OPERATIONS PERSONNEL									
OPERATIONS SECTION CHIEF: DIVISION/GROUP SUPERVISOR :				BRANCH DIRECTOR: GLENN AUSTIN AIR TACTICAL GROUP SPVR:					
6. RESOURCES ASSIGNED THIS PERIOD									
STRIKE TEAM/TASK FORCE/RESOURCE DESIGNATOR	LEADER	NUMBER PERSONS	TRANS. NEEDED	DROP OFF POINT/TIME	PICK UP POINT/TIME				
US EPA	DUNKELMAN	4	N	0800	1800				
VC AG COMMISSION	BELL	3	N	0800	1800				
DOUBLE BARREL	WOOD	2	N	0800	1800				
PATRIOT ENVIRONMENTAL	GUZMAN	12	N	0800	1800				
9. OPERATIONS • INCIDENT REMEDIATION									
10. SPECIAL INSTRUCTIONS									
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LAW		RX 151.130 TX 158.7900	151.4	VNC 49	GROUND TO AIR		RX 154.235 TX 154.235	167.9	VNC 11
PREPARED BY Barb Geringer				APPROVED BY (PLANNING SECTION CHIEF) Barb Geringer			DATE 11/21/2014	TIME 1725	

INCIDENT RADIO COMMUNICATIONS PLAN				1. Incident Name Mission		2. Date/Time Prepared 11/21 1530		3. Operational Period Date/Time 11/22	
4. Basic Radio Channel Utilization									
Radio Type/Cache	Channel	Function	Frequency/Tone	Assignment	Remarks				
King NIFC	VNC 2	Command	Rec 154.325	Command	Trans: 155.835 Tone 79.7				
King NIFC	VNC 3	Tactical	Rec 153.9500	Tactical	Trans: 153.9500 Tone 167.9				
King NIFC	VNC 11	Air to Gound	Rec 154.235	AG and Emergency	Trans: 154.235 Tone 167.9				
King NIFC	VNC 49 (Z-4, Ch-1)	VCSO	Rec: 151.1300	Law Branch	Trans: 158.7900 Tone: 151.4				
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5. Prepared by (Communications Unit) Larry Williams, LSC									

MEDICAL PLAN (ICS 206)

1. Incident Name: MISSION		2. Operational Period:		Date From: 11/22/2014 Time From: 0800	Date To: 11/22/2014 Time To: 1800
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3. Medical Aid Stations:			
Name	Location	Contact Number(s)/Frequency	Paramedics on Site?
MED496	Briggs & HWY 126		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

4. Transportation (indicate air or ground):			
Ambulance Service	Location	Contact Number(s)/Frequency	Level of Service
AMR	616 FITCH AVE., MOORPARK, CA	8055172028	<input checked="" type="checkbox"/> ALS <input type="checkbox"/> BLS
			<input type="checkbox"/> ALS <input type="checkbox"/> BLS
			<input type="checkbox"/> ALS <input type="checkbox"/> BLS
			<input type="checkbox"/> ALS <input type="checkbox"/> BLS

5. Hospitals:							
Hospital Name	Address, Latitude & Longitude if Helipad	Contact Number(s)/Frequency	Travel Time		Trauma Center	Burn Center	Helipad
			Air	Ground			
SANTA PAULA HOSPITAL	825 N. 10 TH ST. SANTA PAULA, CA	8059338600		8MIN.	<input type="checkbox"/> Yes Level: ____	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
VCMC	3291 Loma Vista VENTURA, CA	8056526000		15MIN.	<input checked="" type="checkbox"/> Yes Level: 2	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
ST JOHN'S HOSPITAL	1600 N ROSE AVE OXNARD, CA	8059882500		22MIN.	<input type="checkbox"/> Yes Level: ____	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
LOS ROBLES HOSPITAL	215 W JANSS THOUSAND OAKS, CA	8054972727		32MIN.	<input checked="" type="checkbox"/> Yes Level: 2	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
					<input type="checkbox"/> Yes Level: ____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

6. Special Medical Emergency Procedures:	
CONTACT IMMEDIATE SUPERVISOR IF INJURED OR EXPERIENCEING SYMPTOMS OF EXPOSURE. UTILIZE COMMAND CHANNEL TO REQUEST ASSISTANCE. If Immediate EMS needed, paraphrase radio traffic with "Emergency Traffic". Provide the following Info: Type of injury, Location, Number of victims, agency of victim, point of contact, staging location for EMS response and if hazmat entry/decon required.	
<input type="checkbox"/> Check box if aviation assets are utilized for rescue. If assets are used, coordinate with Air Operations.	

7. Prepared by (Medical Unit Leader): Name: Larry Williams LSC	Signature: _____
8. Approved by (Safety Officer): Name: MIKE VALLEY	Signature: _____

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FINANCE MESSAGE

**ENSURE PERSONNEL AND EQUIPMENT
TIMES ARE DOCUMENTED AND ANY
EQUIPMENT LOSS IS INVENTORIED BY
HOME AGENCY. INCIDENT MAY BECOME A
COST RECOVERY INCIDENT.**

**VNC PERSONNEL - PLEASE SUBMIT A FORM
179 TO FISCAL BILLING.**

THANK YOU.

